

OCCASIONAL PERMIT  
APPLICATION



City of Glendale  
5850 W. Glendale Ave.  
Glendale, AZ 85301  
www.glendaleaz.com/taxandlicense

Account #

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FOR CITY USE ONLY

☐ OCP

1. BUSINESS INFORMATION

Business Name:	
Business Address:	Street Address
	City, State, Zip
Applicant Contact:	Name
	Phone
	Email

2. EVENT INFORMATION

Event Name:	
Event Location Address:	Street Address
	City, State, Zip
Event date(s):	Monday    __/__/__    From _____ am/pm    To _____ am/pm
	Tuesday    __/__/__    From _____ am/pm    To _____ am/pm
	Wednesday    __/__/__    From _____ am/pm    To _____ am/pm
	Thursday    __/__/__    From _____ am/pm    To _____ am/pm
	Friday    __/__/__    From _____ am/pm    To _____ am/pm
	Saturday    __/__/__    From _____ am/pm    To _____ am/pm
	Sunday    __/__/__    From _____ am/pm    To _____ am/pm

Amount Due

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Signature \_\_\_\_\_ Date \_\_\_\_\_

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